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## **Institutions Transition Option**

### **Background:**

The State of Montana's Public Institutions are at a crossroads. Montana State Hospital (MSH) is at capacity and its forensic unit is over capacity. Montana State Prison has the burden of caring for offenders with complex serious mental illness and intellectual disability challenges whose very presence in the prison is a lawsuit waiting to happen. Montana Developmental Center is regularly under threat of closure. Each of these facilities hold residents for longer than necessary, because they are unable to find private providers in the community that are willing to care for them. At the same time, private providers are struggling to find the funding to maintain the operation of private crisis centers that help keep people avoid institutional stays.

It is time for a broad systemic change; for the sake of the people receiving care in these institutions, the people that work in the facilities, and the taxpayers who pay the bill both the care and any potential lawsuits resulting from ineffective care.

## Current Option:

NAMI Montana has been tracking potential system change options throughout the interim. This is the most recent option that we believe worthy of further examination.

- A. Establish forty additional forensic beds at Montana State Hospital for offenders with serious mental illnesses who are too volatile to be treated in Montana State Hospital's existing forensic unit. This will most likely be accomplished by "hardening" an existing wing of MSH
- B. Establish the capacity to care for additional civil patients with serious mental illness at the MDC campus. This will ensure care for civil patients displaced by the hardening of the wing at MSH and potentially others that may benefit from MDC's environment and services.
- C. Establish three transition centers to help residents transition from restrictive, high-cost institutional settings into the community. These facilities would minimize the amount of residents who are stuck in expensive limbo due to private community providers' unwillingness to serve them.
  - a. These transition centers would be operated by the State of Montana and located in Missoula, Billings, and Great Falls.
  - b. One or more of these facilities may have secure beds.
  - c. These facilities should be designed with the goal of utilizing federal healthcare funding, such as Medicaid, to fund their operations when possible.
- D. Establish contracts with private mental health providers to effectively fund crisis services (Emergency Detentions) in the community, including crisis services for people with intellectual disabilities.
- E. Add an electronic medical record system and a new mental health services building (does not include additional beds) at Montana State Prison to help the corrections staff effectively care for offenders with serious mental illness and other brain conditions.

NAMI Montana respectfully asks the State of Montana and Montana Legislature to analyze this option for patient care and cost considerations.

Sincerely,



Matt Kuntz